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TRANSMITTAL FORM  (to be used for all correspondence after initial filin		Filing Date		
		First Named Inventor Seung-ho TAK		
				Examiner Name
		ng) Zachary /		A. DAVIS
		Total Number of Pages in This Submission 2		Attorney Docket Number
		ENCLOSURES (Check	all that appl	(y
Fee Tran	smittal Form	Drawing(s)		After Allowance Communication to T
<b>✓</b> F	ee Attached	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences
Amendment/Reply		Petition .		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
		Petition to Convert to a		
After Final		Provisional Application Power of Attorney, Revocation		Proprietary Information
Affidavits/declaration(s)		Change of Correspondence Address		Status Letter
Extension of Time Request		Terminal Disclaimer		Other Enclosure(s) (please Identify below):
Express Abandonment Request		Request for Refund		Check No. 170643 in the amount of \$450.0
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Signature	MAMILIE .			
Printed name	Mitchell P. Brook, Esq.			
Date October 20, 2005			Reg. No.	32,967
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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

October 20, 200523

Amy M. Sheridan

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anerwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Effective on 12/08/2004. Complete if Known ees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818). 09/700.159 **Application Number** TRANSMITTAL January 9, 2001 Filing Date For FY 2005 Seung-ho TAK First Named Inventor Zachary A. DAVIS **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 2137 Art Unit (\$) \$450.00 TOTAL AMOUNT OF PAYMENT Attorney Docket No. 30781-1 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Name: Luce, Forward, Hamilton & Scripps LLP 50-2298 Deposit Account Deposit Account Number:\_ For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES EXAMINATION FEES** SEARCH FEES **Small Entity Small Entity Small Entity Application Type** Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 Design 200 100 100 130 50 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 600 250 300 200 Provisional 100 0 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee Description Fee (\$) Fee (\$) Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 Multiple dependent claims 180 **Total Claims Multiple Dependent Claims** Extra Claims Fee (\$) Fee Paid (\$) \$0.00 Fee Paid (\$) - 20 or HP = Fee (\$) HP = highest number of total claims paid for, if greater than 20 Extra Claims Fee (\$) Fee Paid (\$) - 3 or HP = \$0.00 HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). **Total Sheets** Number of each additional 50 or fraction thereof Extra Sheets Fee Paid (\$) \$0.00 - 100 = / 50 = (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other: Petition for two (2) month Extension of Time \$450.00

SUBMITTED BY Registration No. 32,967 Signature Telephone (858) 720-6300 (Attorney/Agent) Name (Print/Type) Mitchell P. Brook, Esq. Date October 20, 2005

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